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E-MAIL ADDRESS (Cyptional): ATTORNEY FOR Nume): SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: GITY AND ZIP CODE: BRANCH NAME: MARRIAGE OF PETITIONER: RESPONDENT: CLAIMANT: REQUEST FOR JOINDER OF EMPLOYEE BENEFIT PLAN AND ORDER TO THE CLERK 1. Please join as a party claimant to this proceeding (specify name of employee benefit plan): 2. The pleading on joinder is submitted with this application for filing. Dated: ORDER OF JOINDER 3. IT IS ORDERED a. The claimant listed in item 1 is joined as a party claimant to this proceeding.	-		
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 c. Summons be issued. d. Claimant be served with a copy of the pleading on joinder, a copy of this request for joinder and order, the summons, and a blank <i>Notice of Appearance and Response of Employee Benefit Plan</i> (form FL-374). 	a. The claimant listed in item 1 is joined as a partb. The pleading on joinder be filed.c. Summons be issued.d. Claimant be served with a copy of the pleadin	ng on joinder, a copy of this request for joinder and order, the summons	s, and
Dated: Clerk, By, D	Dated:	Clerk, By	, Deputy